

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**APPLICANT:** Desmond R. Lim      **GROUP:** 1774  
**SERIAL NO.** 997  
**FILED** 09/97,107      **EXAMINER:** Lawrence D. Ferguson  
**FOR:** November 29, 2001  
 THERMALLY AND ELECTRICALLY CONDUCTING HIGH INDEX  
 CONTRAST MULTI-LAYER MIRRORS AND DEVICES

Mail Stop RCE  
 Commissioner of Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

**REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL**

This is a request for Continued Examination (CE) under 37 C.F.R. §1.114 of the above-identified application.

1. Submission required under 37 C.F.R. §1.114

- a.  Previously submitted
  - i.  Consider the amendment(s)/reply under 37 C.F.R. §1.116 previously filed on \_\_\_\_\_  
(Any unentered amendment(s) referred to above will be entered).
  - ii.  Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
  - iii.  Other \_\_\_\_\_
- b.  Enclosed
  - i.  Amendment/Reply
  - ii.  Affidavit(s)/Declaration(s)
  - iii.  Information Disclosure Statement (IDS)
  - iv.  Other \_\_\_\_\_

**CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10**

I hereby certify that this Request for Continued Examination (RCE) Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on 11/7/2005 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number **EV682273044US** addressed to the: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  
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*Elizabeth M. Ball*  
 Elizabeth M. Ball

2. Miscellaneous

- a.  Suspension of action of the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. §1.17(i) required)
- b.  Other \_\_\_\_\_

3. Fees The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.

- a.  RCE fee required under 37 C.F.R. §1.17(e)
- b.  Extension of time fee (37 C.F.R. §§1.136 and 1.17)
- c.  Other \_\_\_\_\_

4. Fee Payment

- a.  Check in the amount of \$395.00 enclosed
- b.  The Director is hereby authorized to charge the above fees, or credit any overpayments to Deposit Account No. 19-0079.

Respectfully submitted,

  
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